



Burns, Doane, Swecker & Mathis, L.L.P.
Suite 500
1737 King Street
Alexandria, Virginia 22314-2727
Telephone: +1.703.836.6620
Group 3 Fax: +1.703.836.2021
Group 4 Fax: +1.703.836.0028
www.burnsdoane.com

Facsimile Cover

The information contained in this facsimile message is or may be attorney-client privileged and contains confidential information intended only for the use of the recipient(s) named below and others expressly authorized to receive it. If you are not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this message is prohibited and you are asked to notify us immediately by telephone and to return this message to us by mail without copying it. Any questions regarding compatibility should be directed to our Office Services Department at +1.703.836.6620.

Date: May 21, 2004

TO: Ms. Nelson

Fax Number: 703 746-6598

Company: US PTO

Telephone:

Your Reference:

FROM: Patrick C. Keane

Telephone: 703.838.6522

Our Reference: 032498-023

Sent By: Debbie

Number of Pages 3
Including Cover:

Message

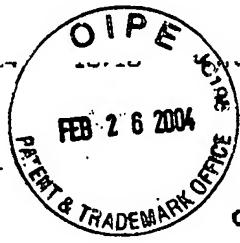
Serial No. 10/786,540

As requested in a telephone call to Mr. Keane, attached is the Declaration as filed with the application. If you need further assistance, please call 703 838-6525.

Thanks

Debbie

92705

Attorney Docket No. 032498-023

**COMBINED DECLARATION AND POWER OF ATTORNEY
FOR UTILITY OR DESIGN PATENT APPLICATION**

As a below named Inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD OF CONTROLLING ELECTRONIC RECORDS

the specification of which (check only one item below):

Is attached hereto; and was amended on _____ (if applicable).
 was filed as United States application number _____ on _____
 and was amended on _____ (if applicable).
 was filed as PCT international application number _____ on _____
 and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §§119 (a)-(d), 172 or 365 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §§119(a)-(d), 172 OR 365:			
COUNTRY (If PCT, Indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (MM/DD/YYYY)	PRIORITY CLAIMED UNDER 35 U.S.C. §§119, 172 OR 365
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

DOCKETED
filed 2/26/04
RJ A3



**COMBINED DECLARATION AND POWER OF ATTORNEY
FOR UTILITY AND DESIGN PATENT APPLICATION**

Page 1
(1/04)

Application No. _____
 Attorney Docket No. 032498-023

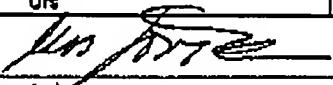
I hereby appoint the attorney and agent(s) associated with the following PTO Customer Number of Burns, Doane, Swackier & Mathis, L.L.P. to prosecute said application and to transact all business in the Patent and Trademark Office connected therewith and to file, prosecute and to transact all business in connection with international applications directed to said invention:

Customer Number **21839**

Address all correspondence to: **BURNS, DOANE, SWECKER & MATHIS, L.L.P.**
Customer Number 21839
P.O. Box 1404
Alexandria, Virginia 22313-1404

Address all telephone calls to: **Patrick C. Keane** at **(703) 836-6620.**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR	
GIVEN NAME (first and middle (if any)) Urs	FAMILY NAME OR SURNAME JORIMANN
INVENTOR'S SIGNATURE 	DATE 02-13-04
RESIDENCE (City, State & Country) CH-8614 Bertschikon, Switzerland	CITIZENSHIP Swiss
MAILING ADDRESS (Complete Street Address Including City, State, Zip & Country) Schlinbergstrasse 10, CH-8614 Bertschikon, Switzerland	
NAME OF SECOND INVENTOR	
GIVEN NAME (first and middle (if any)) Urs	FAMILY NAME OR SURNAME WÜST
INVENTOR'S SIGNATURE 	DATE 02-13-04
RESIDENCE (City, State & Country) CH-8608 Greifensee, Switzerland	CITIZENSHIP Swiss
MAILING ADDRESS (Complete Street Address Including City, State, Zip & Country) Am Pfistermattli 44, CH-8608 Greifensee, Switzerland	
NAME OF THIRD INVENTOR	
GIVEN NAME (first and middle (if any))	FAMILY NAME OR SURNAME
INVENTOR'S SIGNATURE	DATE
RESIDENCE (City, State & Country)	CITIZENSHIP
MAILING ADDRESS (Complete Street Address Including City, State, Zip & Country)	

BURNS DOANE
BURNS DOANE SWECKER & MATHIS LLP
 INTELLECTUAL PROPERTY LAW

**COMBINED DECLARATION AND POWER OF ATTORNEY
 FOR UTILITY OR DESIGN PATENT APPLICATION**

Page 2